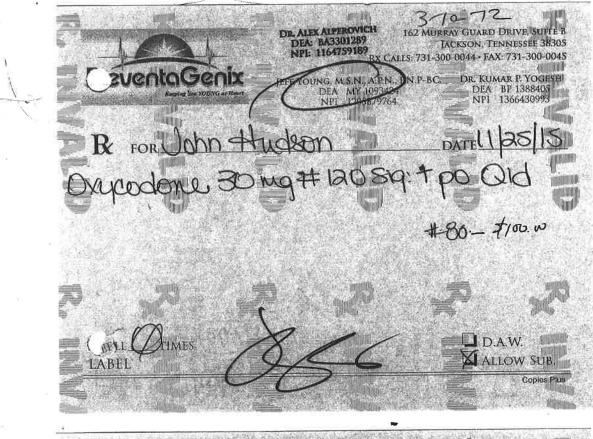
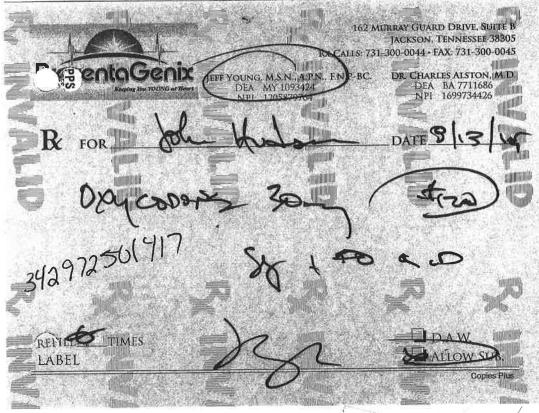
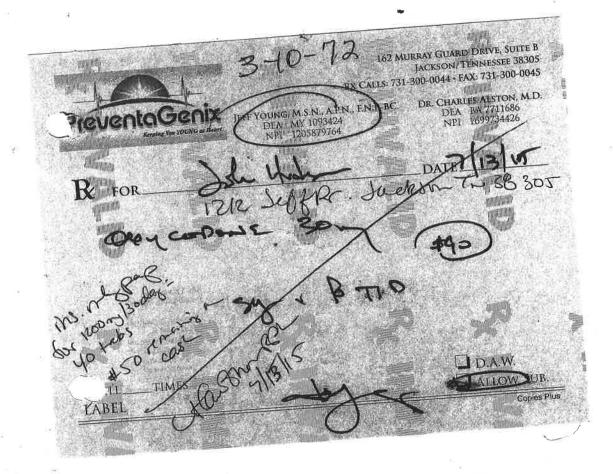


-0001 FAX

(10/kg)







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4:	6092876278019	SPI#:	Msg ID#: 8e690f4c442340ea90a429902e32d9f7 Prescriber Agent: RYAN,TRINA Authorized By: RYAN,TRINA
3	731-784-7773 731-668-4557 FA0046727 1801950225	Phone: Fax: DEA#: NPI#: License#:	Supervisor: DR. ALLEN,YOW,MISTY Address: 400 US HIGHWAY 45 W THREE WAY, TN, 383431560
	731-660-6915 731-668-4557 FR4477053 1265859433		Doctor: RYAN, TRINA Address: 400 US HIGHWAY 45 W THREE WAY, TN, 383431560
	QTY: 30 Capsule DAW: 0		TIN 300 06-11 O @ HS
100	: U1-13-17 : 03-10-72 : 731-882-9848	te wrrucen: DOB: Phone:	Patient: HUDSON, D, JOHN Date Address: 12 JEFF DRIVE JACKSON, TN, 38305
	PHIPPS PHARMACY #4 INCRESORUE 38305 (731) 668-9072 JOHN HUDSON Re: 004-1095239 I-14-17 RACKSON, TN. 300MG GABAPENTIN 38305 DOB: 3-10-72 RPH: RAH #30 PORIGINA #30 OW:#30 ECTRONIC RX PRO: S4-57 Dr. PRONE 3131 784-7773 Dr. PRONE 3131 784-7773 POR US HIGHWAY 45 W MOUTH AT TAKE ONE CAPSULE BY MOUTH AT BEDTIME FOR CHRONIC PAIN DAW: 0 DAW: 0 DAW: 1-3-17 DW: 1-3-17 ACRE ONE CAPSULE BY MOUTH AT DATE: DAM: 0 DAW: 0	crose	Received From: SureScrip PHIPPS PHARMACY #4 19 HUGHES DRIVE JACKSON, TN 38305 PH: 731-668-90

